Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

16764332

CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY			OTHER	
TOTAL CLAIMS					RATE FEE		OR 7		
FOR	NUMBER FILE) NUME	BER EXTRA		BASIC FEE	 	-	RATE	FEE
TOTAL CHARGEABLE CLAIMS	2/ minus 2		I DENEXTINA		٠.	375.00	OR	BASIC FEE	750.00
INDEPENDENT CLAIMS	,	t =			X\$ 9=		OR	X\$18=	
MULTIPLE DEPENDENT CLAIM PR	/ minus :	3 =			X42=		OR	X84=	
					+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter			column 2		TOTAL		OR	TOTAL :	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST					SMALL	ENTITY	OR	OTHER SMALL	
REMAINING AFTER AMENDMENT	PR	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total *	Minus **	2/	Ξ		X\$ 9=		OR	X\$18=	
Independent *	Minus ***	20	=	1	X42=		OR	X84=	
FIRST PRESENTATION OF ML	JLTIPLE DEPEND	ENT CLAIM			.140				
• •	•			- L	+140= TOTAL		OR	+280= TOTAL	
(Column 1)	10		u	A	DDIT. FEE	·	OR,	ADDIT. FEE	
CLAIMS		olumn 2) HIGHEST	(Column 3)	-				<u> </u>	
REMAINING AFTER AMENDMENT Total Independent Independen	PR	NUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total *	Minus **		=		X\$ 9=		OR	X\$18=	1
Independent *	Minus ***		= .		X42=		ŀ		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					742-		OR	X84=	
	•			L	+140=	·	OR	+280=	
				Α	TOTAL DDIT. FEE	-	OR ,	TOTAL ODIT. FEE	
(Column 1) CLAIMS			(Column 3)		*,				· · · · · · · · · · · · · · · · · · ·
REMAINING AFTER AMENDMENT Total Independent FIRST PRESENTATION OF MUI	N PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRÀ			ADDI- TIONAL		RATE	ADDI- TIONAL
Total	Minus **	No.	= -		X\$ 9= ±	TFEE	<u> </u>	100 M	··FEE
Independent *	Minus	delig signer - co	= (44) 2	****	TOTAL BUILDING		OR	X\$18=	en e
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					X42=-	ingaiste (OR	::X84=	
If the option is column 4 to local to the		An op		3 14 1	+140=		OR	+280=	
If the entry in column 1 is less than the If the "Highest Number Previously Paid	I For IN THIS SPAC	E ic loca than	20 40-4 500 5	. AE	TOTAL DIT. FEE) R	TOTAL DDIT. FEE	1 1 1 Y
**If the *Highest Number Previously Paid The *Highest Number Previously Paid	For" (Total or Indepe	∠⊏ is less than endent) is the l	ı ು, enter "3." highest number			opriate box	in colu	mn 1.	